

Express Mail Label No.:  
Date of Deposit:

Attorney Docket No: 22508-582 (BFLP 0169)  
(AM100863 L2)

**COMBINED DECLARATION AND POWER OF ATTORNEY  
FOR PATENT APPLICATION**

As a below named inventor, I hereby declare that:

My residence,  
post office address and citizenship are as stated below next to my name.

I believe I am an original, first and joint inventor of the subject matter (an original, first and joint inventor) which is claimed and for which a utility patent is sought on the invention entitled:

**COMPOSITION AND METHOD FOR TREATING LUPUS NEPHRITIS**

the specification of which is attached hereto, bearing Attorney Docket No. 22058-582.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56.



I hereby claim the benefit under Title 35, United States Code, § 119(e) or §120 of any United States application(s), or §365(c) of any PCT International application(s) designating the United States of America listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application:

<b>Application No.</b> <i>(U.S.S.N.)</i>	<b>Filing Date</b> <i>(dd/mm/yy)</i>	<b>Status</b> <i>(Patented, Pending, Abandoned)</i>
60/428,094	21 November 2002	Pending

Express Mail Label No.:  
Date of Deposit:

Attorney Docket No: 22508-582

I hereby appoint the following attorneys and/or agents to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

**CUSTOMER NO. 30623**

all of MINTZ, LEVIN, COHN, FERRIS, GLOVSKY AND POPEO PC, One Financial Center, Boston, Massachusetts 02111;

<b>Attorney or Agent</b>	<b>Registration No.</b>	<b>Attorney or Agent</b>	<b>Registration No.</b>
Elizabeth M. Barnhard	31,088	Elizabeth A. Hurley	41,859
Rebecca R. Barrett	35,152	M. Andrea Ryan	26,469
Christine P. Bellon	41,611	Adley F. Mandel	26,942
Egon E. Berg	21,117	Arnold S. Milowsky	35,288
Gavin T. Bogle	Limited Recognition Under 37 C.F.R. § 10.9(b)	Daniel B. Moran	41,204
William H. Calnan	29,520	Michael R. Nagy	33,432
Diana M. Collazo	46,635	Barbara L. Renda	27,626
Bruce M. Eisen	22,847	George Tarnowski	27,472
Steven H. Flynn	29,639	Albert R. Ubieta	43,212
Alan M. Gordon	30,637	Darryl L. Webster	34,276
John W. Hogan, Jr.	32,703		
Gale F. Matthews	32,269		
Joseph M. Mazzaresse	32,803		

all of WYETH, Five Giralda Farms, Madison, NJ 07940;

as Applicant's attorneys with full power of substitution and revocation to take any and all action necessary with regard to the above-identified patent.

Address all telephone calls to **Ivor R. Elrifi** at telephone number 617/348-1747.

Address all correspondence to: **CUSTOMER NO. 30623**

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these

Express Mail Label No.:  
Date of Deposit:

Attorney Docket No: 22508-582

statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or patent issued thereon.

\_\_\_\_\_  
Inventor's Signature **Margot O'Toole**  
Full Name of Inventor: Margot O'Toole  
Citizenship: United States  
Residence: 353 Albermarle Road, Newton, MA 02460  
Post Office Address: SAME

\_\_\_\_\_  
Date

\_\_\_\_\_  
Inventor's Signature: **William Martin Mounts**  
Full Name of Inventor: William Martin Mounts  
Citizenship: United States  
Residence: 6 Island Way, Andover, MA 01810  
Post Office Address: SAME

\_\_\_\_\_  
Date

\_\_\_\_\_  
Inventor's Signature: **Negin Shojace**  
Full Name of Inventor: Negin Shojace  
Citizenship: United States  
Residence: 487 James Road, #201, Palo Alto, CA 94306  
Post Office Address: SAME

\_\_\_\_\_  
Date